More than meets the eye….

THE ELVER PROGRAM – AN INNOVATIVE PARTNERSHIP BETWEEN SWSLHD AND DCJ

Where does the name Elver come from?
Elver is the name of a baby eel
Parramatta means ‘place of the eel’ in the local language of the Burramattagal people of the Dharug nation
‘going back to their traditional waterhole where they belong’
The Elver Programme: increasing opportunities to connect and a place to ‘belong’

The Elver Program
Partnership between DCJ and SWSLHD to deliver:
- Specialist multi-disciplinary clinical services to children under 18 years in statutory OOHC with intensive and complex needs
- Consultation and capacity building
- Contribute to the evidence base effectively treat trauma

About us...
Multi-disciplinary team: Psychiatry, OT, Speech pathologist, Clinical Psychologist, CNC, SW, mental health clinicians, admin, DCJ Manager
Our Young People
Children with complex mental health needs, behavioural challenges + significant trauma histories.

Model of care
Interventions based on the presentation of the young person and the needs of the system around them. They include:
- Specific assessments and interventions
- Assessment, education and support of the care system
- Highlighting the needs of the child
- Facilitating co-ordination of various systems particularly at transition points.
Self Harm in OOHC

Neglect is the most powerful predictor of self-destructive behaviour

This implies childhood trauma contributes heavily to the initiation of self-destructive behaviour
Lack of secure attachments maintains it

Locus of Control

Commonly the shift is from:

Passive experience of intense, diffuse, emotional tension over which we have no control
To
Active experience; intense, focused, sensory pain that is within our control

Self Harm from OT perspective

Self-harm impacts on participating in meaningful activity and roles
Self-harm can be orienting, disorienting or to influence responses from others.
Self-harm can be used for regulation

Comprehensive assessment involves observation, standardised assessment and caregiver report.
Sensory modulation approaches can be used to address self-harm.

Exploring Self-Harm: Person Factors

- Moderate Intellectual Disability (functioning as a 6 yr old)
- Severe Language Disorder (receptive & expressive)
- Sensory Processing Difficulties
- Attachment Difficulties
- Mental Health Complexities

Exploring Self-Harm: Environment Factors

- Rotating care team
- Shift workers & complex staffing
- Training of carers
- Need to manage other YP with complex needs
- Shared case management b/w DZ & NGO
- Distilled info
Exploring Self-Harm: Activity Factors

Needs proactive support to engage in activities
Needs opportunities for developmentally appropriate play and socialisation
Access to education
Difficulties with unstructured times
Difficulties with transitions b/w activities
Needs structured routine

Exploring Self-Harm with Caregivers

What are the precipitants to the self-harm incident?
- Consider routine unstructured time, changes in caregivers, use of visuals, environmental changes, conflict with caregivers or peers

What did the self-harm incident look like?
- Consider length of incident, if anyone present how they responded, what the self-harm looked like (cutting, head banging, monitored)

What happened after the self-harm incident?
- Consider caregivers response, whether emergency services involved, whether caregiving responses appear to be reinforcing

Reflection on self-harm incident
- Exploring function, whether other strategies were trialled or barriers to use, exploring impact of incident on functioning (school, social, routine, relationships)

Goal: Reduce self-harm to enhance participation in meaningful activity

Strategies to achieve goal:
- Increase adaptive coping skills and emotion regulation strategies through sensory modulation approaches
- Support development of communication skills and share communication supports with care team
- Support creation of meaningful developmentally appropriate routine augmented by visual aids
- Work with system to share understanding of person, environmental and activity factors impacting on self-harm
- Input into care team model of practice (ARC)

The Senses

How do you modulate sensation?

Summary - Key Considerations

1. There is no one-size fits all approach
2. Essential to consider the child’s perspective and work with key people in their system
3. When considering self-harm it is important to consider how the environment, person and activity are interacting to produce the harmful behavior

There is always much more than meets the eye and a child is much more than the behavior that they present with!